ISDH Annual Fiscal Report of a Nonprofit Acute Care Hospital

### **Hospital: Clarian Health Partners**

Year: 2004 City: Indianapolis Peer Group: Large

**Statement One: Summary of Revenue and Expenses** 

1. Gross Patient Service Revenue				
Inpatient Patient Service Revenue	\$1,527,744,000			
Outpatient Patient Service Revenue	\$932,222,000			
Total Gross Patient Service Revenue	\$2,459,966,000			
2. Deductions from I	Revenue			
Contractual Allowances	\$994,025,000			
Other Deductions	\$87,036,000			
Total Deductions	\$1,081,061,000			
3. Total Operating R	Revenue			
Net Patient Service Revenue	\$1,378,905,000			
Other Operating Revenue	\$98,210,000			

4. Operating Expen	nses
Salaries and Wages	\$515,622,000
Employee Benefits and Taxes	\$117,111,000
Depreciation and Amortization	\$99,531,000
Interest Expenses	\$21,799,000
Bad Debt	\$38,240,000
Other Expenses	\$638,443,000
Total Operating Expenses	\$1,430,746,000
5. Net Revenue and Ex	kpenses
Net Operating Revenue over Expenses	\$46,369,000
Net Non-operating Gains over Losses	\$39,191,000
Total Net Gain over Loss	\$85,560,000

Total Operating Revenue	\$1,477,115,000

$\overline{0}$	6. Assets and Liabilities				
_	Total Assets	\$2,991,048,000			
	Total Liabilities	\$1,487,262,000			

Statement Two: Contractual Allowances						
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue			
Medicare	\$744,106,169	\$431,245,472	\$312,860,697			
Medicaid	\$457,803,277	\$217,067,100	\$240,736,177			
Other State	\$0	\$0	\$0			
Local Government	\$0	\$0	\$0			
Commercial Insurance	\$1,167,021,951	\$376,318,361	\$790,703,590			
Total	\$2,368,931,397	\$1,024,630,933	\$1,344,300,464			

Statement Three: Unique Specialized Hospital Funds					
Fund Category	Estimated Incoming Revenue from Others	Estimated Outgoing Expenses to Others	Net Dollar Gain or Loss after Adjustment		
Donations	\$163,880	\$0	\$163,880		

Educational	\$5,096,962	\$51,539,669	(\$44,285,707)
Research	\$304,509	\$284,000	(\$2,795,196
Bioterrorism Grant	\$284,000	\$284,000	\$0

Number of individuals estimated by this hospital that are invol	ved in education
Number of Medical Professionals Trained In This Hospital	2,012
Number of Hospital Patients Educated In This Hospital	0
Number of Citizens Exposed to Health Education Message	1,634,000

### Statement Four Annual Summarized Community Benefit Statement on Nonprofit Hospital

This hospital is a nonprofit organization and files an annual community benefit statement with the Department under Indiana Code 16-21-9. Each nonprofit hospital must confirm its mission statement, document the number of persons and dollars allocated under its adopted charity care policy, and describe the progress of the community to achieve specific objectives set by the hospital.

County	Marion	Community	State of Indiana
Location		Served	

### **Hospital Mission Statement**

"To improve the health of our patients and community through innovation and excellence in care, education, research, and service".

Unique Services	Type of Initiatives	<b>Document Available</b>

Medical Research	YES	Disease Detection	YES	Community Plan	YES
Professional Education	YES	Practitioner Education	YES	Annual Statement	YES
Community Education	YES	Clinic Support	YES	Needs Assessment	2001

#### Allocation of Dollars and Persons Served under Adopted Charity Policy

Most nonprofit hospitals adopt a charity benefit policy to serve the medically indigent. On an annual basis, the hospital will confirm the eligibility and set aside dollars to ensure low-income persons can be offered needed inpatient and outpatient hospital services.

	2002	2003	2004
Persons served in last twelve months	NR	1,551,261	1,634,000
Charity Care Allocation	(\$54,001,166)	(\$18,255,107)	(\$36,503,575)

### Hospital Community Benefit Projects and the Projects' Net Cost

On an annual basis, all nonprofit hospitals will report on the progress that the local community has made in reducing the incidence of disease and improving the delivery of health services in the community.

Name of Program and Description of Progress Made in Achieving Annual Objectives	Net Costs of Programs
Nutrition and Fitness	(\$107,248)
Injury Prevention	(\$346,611)
Teen Pregnancy Prevention	(\$81,531)

Violence Prevention	(\$58,000)
Tobacco Cessation/Prevention	(\$169,453)
Subtotal	(\$762,843)

# **Summary of Unreimbursed Costs of Charity Care, Government Funded Programs, and Community Benefits**

Based on uniform definitions of costs, each nonprofit hospital must identify the costs of serving its community that are not reimbursed by government and other third party payers.

Specialized Programs	Unreimbursed Costs
1. Total unreimbursed costs of providing care to patients	(\$180,689,542)
unable to pay, to patients covered under government funded programs, and for medical education, training.	
2. Community Health Education	\$239,601)
3. Community Programs and Services	(\$7,250,579)
4. Other Unreimbursed Costs	(\$1,332,626)
5. Total Costs of Providing Community Benefits	(\$189,512,348)

### **Identification of Additional Non-Hospital Charity Costs**

In addition, some hospitals will have non-hospital organizations under its ISDH license are providing community benefits in this fiscal year.

Organization Providing Charity Care	Net Costs of Care
None	\$0

### For further information on these initiatives, contact:

Hospital Representative: Don Deutsch

Telephone number: 317/962-6110

Web Address Information: www.clarian.org

## ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL AND OTHER HOSPITALS IN ITS PEER GROUP

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	9,825	2,262
2. % of Salary	Salary Expenses divided by Total Expenses	36.0%	36.7%
3. Average Daily Census	Patient Days divided by annual days (365 days)	976.0	251.6

4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	6.8	5.1
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$4,790	\$3,873
6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$29,097	\$19,185
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	37.9%	41.1%
8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	\$1,343	\$1,295
9. % of Medicare	Medicare Revenue divided by the Gross Patient Revenue	30.2%	40.6%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	2.7%	4.3%
11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	(\$36,5032,575)	(\$5,489,682)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	3.1	5.9

### Notes:

- NR = Not Reported
   See Statewide Results for definitions of terms.